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STATE OF DELAWARE
BOARD OF GEOLOGISTS

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PROFESSIONAL EXPERIENCE REFERENCE FORM – RECIPROCITY APPLICANTS

APPLICANT INFORMATION – The applicant completes this section (Questions 1-5).

Arrange for the Board to receive at least **two professional references** that document a combined total of **two years** of licensed professional geologic work experience **in your selected reciprocity state** (see Question 7 of your licensure application) as required by Section 2.2.1.3 of the Rules and Regulations. Complete this section and send the form to *each* person who will verify your licensed professional geologic work experience **in your selected reciprocity state only**.

1. Full Name: _____
First Middle Last
2. Mailing Address: _____

City State Zip
3. Phone: _____ Email: _____
Day Evening
4. Active License Number(s): _____ State(s): _____
5. Enter **your selected reciprocity state** (from Question 7 of your *Application for Geologist Licensure by Reciprocity*).
_____. This is the jurisdiction where you hold a *current* Geologist license and where you acquired the licensed professional geologic experience that you want the person named below to verify.

PROFESSIONAL GEOLOGIC EXPERIENCE – The person verifying the applicant's licensed professional geologic work experience completes this section (Questions 6-15).

The applicant named above is applying for Geology licensure in Delaware. Provide the following information to verify the **licensed professional geologic work experience that the applicant acquired while working in the jurisdiction in Question 5 above**.

6. Your Name: _____
7. Phone: _____ Email: _____
Day Evening
8. Your Geologic Registration Number: _____ State: _____
9. Your Employer Name: _____ Position: _____
10. Check your relationship to the applicant named above:
☐ Employer ☐ Supervisor ☐ Co-worker ☐ Other: _____
11. I have known the applicant **professionally** since: _____
12. On the next page, provide information about the **licensed professional geologic work experience that the applicant acquired while working in the jurisdiction entered in Question 5 above**. Do not enter information about experience that the applicant acquired in any other jurisdiction. Enter only work experience about which you have **first-hand, detailed personal knowledge in your professional capacity**. Space is provided for two periods of work experience. For example, if you supervised the applicant on two projects, you may enter the first project under Work Experience 1 and the second under Work Experience 2.

You may copy this page.

WORK EXPERIENCE 1

I have **personal knowledge** of the applicant's licensed professional geologic work experience in _____ from _____ to _____.
State, U.S. territory or D.C.

During this period, was the applicant employed as a geologist using initiative, skill, and individual interpretative judgment? Yes ☐ No ☐

Employer Name: _____

Where did this work experience take place? _____
State, U.S. territory or D.C.

Indicate whether the applicant's work as a geologist during this period was ☐ Full-time ☐ Part-time

If part-time, enter percentage of geologist work _____ % (e.g., 30 hours working as a geologist out of 40-hour project = 75%)

Describe the applicant's work (e.g., projects) and the quality of his or her work performed during this period. *Only work that took place in the jurisdiction that the applicant entered in Question 5 above is relevant:* _____

WORK EXPERIENCE 2

I have **personal knowledge** of the applicant's licensed professional geologic work experience in _____ from _____ to _____.
State, U.S. territory or D.C.

During this period, was the applicant employed as a geologist using initiative, skill, and individual interpretative judgment? Yes ☐ No ☐

Employer Name: _____

Where did this work experience take place? _____
State, U.S. territory or D.C.

Indicate whether the applicant's work as a geologist during this period was ☐ Full-time ☐ Part-time

If part-time, enter percentage of geologist work _____ % (e.g., 30 hours working as a geologist out of 40-hour project = 75%)

Describe the applicant's work (e.g., projects) and the quality of his or her work performed during this period. *Only work that took place in the jurisdiction that the applicant entered in Question 5 above is relevant:* _____

13. Provide your evaluation of the applicant's **overall** work performance. Check only *one* evaluation for each criterion.

	Excellent	Good	Poor	Unknown
Quality of professional work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application of technical knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional attitude, initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soundness of judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional reputation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. Do you consider the applicant qualified for licensure as a geologist? Yes ☐ No ☐

15. Additional remarks or comments: _____

I certify that the information that I have provided is accurate and truthful to the best of my knowledge.

SIGNATURE: _____ Date Completed: _____

AFFIX
SEAL

Mail the completed form *directly* to Board of Geologists at the address above.

- The Board office will accept only forms it receives *directly* from the person verifying the applicant's licensed professional geologic work experience. Forms returned by the applicant will not be accepted.
- Faxed forms will not be accepted.